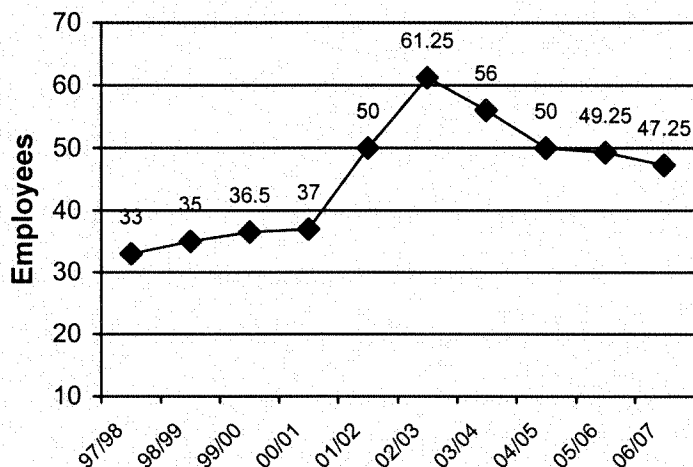


**MISSION STATEMENT**

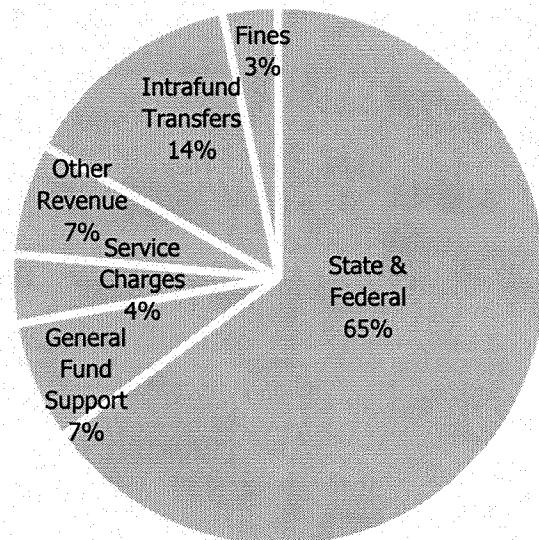
Drug and Alcohol Services promotes safe, healthy, responsible, and informed choices concerning alcohol and other drugs through programs responsive to community needs.

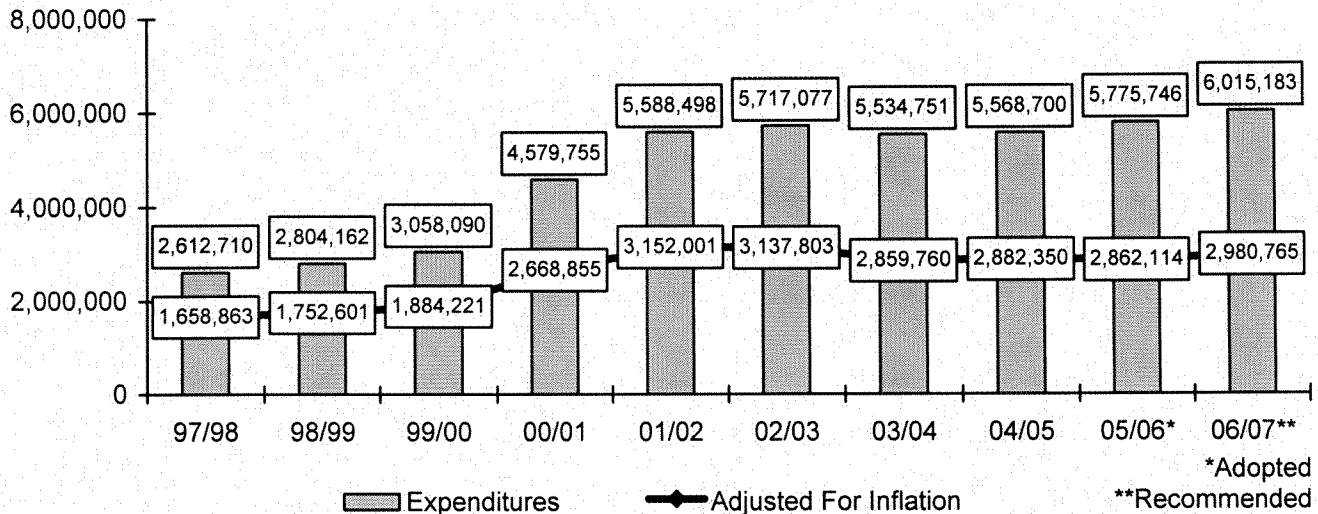
<u>Financial Summary</u>	<u>2005-06 Budget</u>	<u>2005-06 Projected</u>	<u>2006-07 Requested</u>	<u>2006-07 Recommended</u>	<u>Change From 2005-06</u>
Revenues	\$ 4,804,472	\$ 5,090,506	\$ 4,731,496	\$ 4,769,196	\$ (35,276)
Salary and Benefits	3,771,247	3,838,145	3,817,722	3,929,076	157,829
Services and Supplies	1,267,925	1,628,729	1,210,253	1,349,533	81,608
Other Charges	736,574	736,574	736,574	736,574	0
**Gross Expenditures	\$ 5,775,746	\$ 6,203,448	\$ 5,764,549	\$ 6,015,183	\$ 239,437
Less Intrafund Transfers	768,507	910,175	752,814	824,514	56,007
**Net Expenditures	\$ 5,007,239	\$ 5,293,273	\$ 5,011,735	\$ 5,190,669	\$ 183,430
General Fund Support (G.F.S.)	\$ 202,767	\$ 202,767	\$ 280,239	\$ 421,473	\$ 218,706

**Number of Employees**  
(Full Time Equivalent)



**Source of Funds**



**10 Year Expenditures Adjusted For Inflation****SERVICE PROGRAMS****Treatment**

Through regional centers located in Atascadero, San Luis Obispo and Arroyo Grande, outpatient treatment programs provide individual, family and group counseling for community members seeking recovery from alcohol and other drug problems. Licensed and credentialed staff provide treatment services and all programs are certified by the California Department of Alcohol and Drug Programs. A variety of populations are served, including young children, youth, adults, intravenous drug users, and pregnant and parenting women. Treatment services vary in intensity based on individual need and can last up to one year. Aftercare services are provided as well as drug testing services.

Total Expenditures: \$3,481,568 Total Staffing (FTE): 31.5

**Prevention**

Prevention activities seek to prevent alcohol and other drug problems before they occur. A primary focus is placed on youth and assisting the community-at-large in the development of an alcohol and other drug-free social environment. Prevention activities include the support of community coalitions such as The Prevention Alliance and 10 community-based Youth Task Forces. Friday Night Live is a prevention program whose youth development activities reach 4<sup>th</sup> through 12<sup>th</sup> grade students in schools throughout San Luis Obispo County. The HIV street outreach and educational campaigns promote the awareness of problems associated with drug use and HIV risk.

Total Expenditures: \$1,797,041 Total Staffing (FTE): 15.75

**Pass Through**

Drug and Alcohol Services receives funding directly from the State and forwards it to Pasos de Vida, Life Steps Foundation, Inc. for residential services for women with chemical dependency issues and mental health issues.

Total Expenditures: \$736,574 Total Staffing (FTE): 0

**DEPARTMENT COMMENTS*****Key Accomplishments in Fiscal Year 05-06*****Excellence in Customer Service**

- Drug and Alcohol Services developed a streamlined customer satisfaction survey which pinpoints areas where we are doing well and areas where we can serve our clients better. The survey is being piloted in the San Luis Obispo Center, and results are integrated into our quarterly analyses in order to provide timely responses to our clients changing needs.
- Drug and Alcohol Services increased access for community members in Paso Robles/San Miguel and Oceano by moving staff members out of the office and into the community, which reduced language, transportation and other barriers to prevention and treatment services.

**Continuous Internal Business Improvements**

- Drug and Alcohol Services generated cost savings of \$3,300 and saved 39 hours of supervisor travel time in fiscal year 05-06 by organizing the Supervisory team so that a supervisor oversees all programs in a specific region. This region-based supervision structure replaced a program-based supervisory model that required supervisors to travel throughout the County to cover basic program needs.
- Drug and Alcohol Services implemented a system to electronically transfer drug test results from our testing vendor's database directly into Drug and Alcohol Services' databases eliminating manual entry of drug test results. The system also automatically alerts counselors when a client tests positive, which allows the counselor to respond quickly and modify the client's treatment plan as necessary.
- Drug and Alcohol Services aligned our website with the County's model and began modifications that will allow us to implement on-line payments and registration and greater community access to educational materials.

**Innovative Finance**

- Drug and Alcohol Services collected an additional \$17,138 in past due Prop 36 fees by partnering with the Probation Department's collections unit.
- In fiscal year 05-06, Drug and Alcohol Services retained \$1.5 million in existing grants and contracts and obtained five new grants and one contract that increased revenues by \$255,370 and provide the community with programs that focus on DUI Prevention, Seatbelt Safety, youth DUI prevention, and distribution of breathalyzers to local law enforcement.

**Commitment to Learning and Growth**

- Every Drug and Alcohol Services staff member is required to attend at least one relevant Employee University or other class per year. Staff members have attended courses addressing topics such as team building, presentation skills, writing skills, conflict management, and safety. Staff members are encouraged to implement what they have learned into their daily work through training other staff members, providing reports on their classes and discussions with their supervisor.
- The State requires that 30% of staff providing drug and alcohol education and treatment services either be certified as Addiction Specialists, Licensed Therapists or Registered Interns. In the past year, five additional staff members have completed the State certification requirement. In FY 05-06 the percentage of certified staff increased from 66% to 80%.

***Major Focus for Fiscal Year 06-07*****Using Technology to Improve Customer Service**

- Drug and Alcohol Services will implement a customer customer-friendly web site that provides community access to educational materials, registration paperwork, and our on-line payment system.

**New Internal Business Improvements**

- Drug and Alcohol Services will implement MATRIX, a science-based treatment model, to modernize and standardize treatment services for maximum effectiveness.
- Prevention outcomes will be tracked and measured through use of the State's California Outcomes Measurement - Prevention system, which will provide statewide benchmarks and provide an increased availability to real time data.

**Finance**

- Drug and Alcohol Services will expand our collaboration with the Probation Department's collections unit to include Treatment and DUI clients. This will result in a 10% increase in past-due collections over the current fiscal year.
- Drug and Alcohol Services will continue to pursue grant opportunities, focusing on those that leverage existing resources.

**Learning and Growth**

- The percentage of Drug and Alcohol Services staff members meeting state certification requirements will increase from 80% to 90%.

***Key Challenges & Strategies for Fiscal Year 06-07*****Grant Reduction**

- In the 2006-2007 fiscal year, DAS will lose revenue from reduced and expiring grants including:

- The Safe and Drug Free Schools and Communities Grant which has provided vital alcohol and drug prevention programs in our County's most rural schools.
- The Enforcing Underage Drinking Laws collaborative grant with local police.
- The Office of Traffic Safety grants which focus on high school age students, address drinking and driving and seatbelt use, and provide funds to collaborate with the DUI task force for DUI prevention.
- Continued Proposition 36 funding remains uncertain, as the State moves from a five-year to a yearly appropriation schedule. While the County of San Luis Obispo's Proposition 36 outcomes better State averages, the possibility exists that in future years we may be mandated to provide services without dedicated State funding.

Drug and Alcohol Services has already begun looking for new sources of revenue, including grants and community collaborations to continue our important prevention and treatment work. We recently submitted a grant request to the federal Substance Abuse and Mental Health Services Administration that, if approved, will provide \$900,000 in funds for youth treatment over a three-year period. We have also begun working with our partners in Probation, the Courts and the community to address and prioritize contingencies for Proposition 36 in order to lessen the potential negative impact and continue serving this unique population.

### **Progressive Technology**

- Continued implementation of the California Outcomes Measurement System (CalOMS) and implementation of the CalOMS- Prevention system will provide an on-going challenge as operations and administrative support staff along with our community partners will be required to learn and develop new computer and data collection processes. Drug and Alcohol Services has taken the lead in the State by being the first County to convert our treatment record reporting system to the new CalOMS system. We will continue to train staff and agency partners while developing tools to minimize staff paperwork and delays in report generation.

### **COUNTY ADMINISTRATOR'S COMMENTS AND RECOMMENDATIONS**

The level of General Fund support is recommended to increase dramatically for the Drug & Alcohol Services department. The General Fund support is recommended to increase by \$218,706 or 107%. However, \$60,000 or 30% of this increase is due to an accounting adjustment. Measure A funds (Tobacco Settlement Funds) of \$60,000 were redirected to the Mental Health Department in order to better align with the intent of the legislation. As such, the Mental Health Department's level of General Fund support is \$60,000 less than it otherwise would have been and Drug & Alcohol's is \$60,000 more than it would have otherwise been. Within the overall Health Agency, this change is a wash.

The primary reason for the increased level of General Fund support is a reduction of \$35,000 in total revenue. Grant revenues have essentially been flat, and as such have not kept up with the cost of living increases associated with staffing and other costs. The most significant loss of revenue is the CalWORKS grant funding, which is targeted for substance abuse treatment and is passed through the Department of Social Services to Drug and Alcohol Services. Even with the significant increase of General Fund support, staffing reductions will occur in this proposed budget. Total allocated positions are recommended to decrease by 2.0 and another 1.75 positions are budgeted to remain vacant.

The additional General Fund support avoided the elimination of an additional 2.0 Drug & Alcohol Specialist positions. These positions are recommended to continue because of the department's ability to produce results. Last year, the Administrative Office supported the addition of a position in recognition of the department's efforts in terms of improving its operations. The results that were targeted (related to client wait times, admission time, and treatment services) for the position were met. As such, this position is recommended to continue and to receive General Fund support. A second position is proposed to be supported by the General Fund in order to avoid increasing wait times and to avoid having to send clients from San Luis Obispo to the North or South County for services.

The changes to the department's allocated positions are as follows:

- One Accountant position is eliminated (transferred to the Mental Health Department) as part of the Health Agency reorganization.

- A 0.75 Administrative Assistant position has been eliminated and replaced with a 1.0 Accounting Technician position as part of the Health Agency reorganization.
- Two Health Care Analyst positions have been changed to Administrative Service Officer I/II positions as part of the Health Agency reorganization.
- The Director of Drug & Alcohol Services position has been changed to a Division Manager position as part of the Health Agency reorganization.
- A Drug & Alcohol Services Specialist position was added to support dual diagnosis clients and is funded via the Mental Health Services Act.
- 2.5 Drug & Alcohol Services Specialist positions are eliminated due to reduced funding.
- A 0.5 Drug & Alcohol Worker I/II position has been changed to a 0.75 position in order to better align with program requirements.

### **GOALS AND PERFORMANCE MEASURES**

<b>Department Treatment Goal:</b> To reduce alcohol and other drug-related problems among program participants who access services in regional clinics that provide efficient, high quality, intensive treatment services to community members desiring recovery from the misuse of alcohol and/or other drugs.						
<b>Community-wide Result Link:</b> A Healthy Community.						
<b>1. Performance Measure: Percentage of clients who report reduced drug and/or alcohol use in the 30 days prior to discharge from DAS treatment.</b>						
01-02 Actual Results	02-03 Actual Results	03-04 Actual Results	04-05 Actual Results	05-06 Adopted	05-06 Projected Results	06-07 Target
n/a	n/a	n/a	n/a	n/a	n/a	New Measure 80% of 352 Clients
<b>What:</b> Decreased or eliminated drug and alcohol use demonstrates an impact of treatment and treatment's subsequent effect on behavior.						
<b>Why:</b> Successful recovery involves positive lifestyle changes.						
<b>How are we doing?</b> This is a new measure designed to coincide with the implementation of the California Outcomes Measurement System (CalOMS) administered by the California Dept. of Alcohol and Drug Programs. (Data Source: California Outcome Measurement System, CalOMS)						
<b>2. Performance Measure: Percentage of adult treatment clients who state overall satisfaction with Treatment Programs as measured by the client satisfaction survey at the levels of Above Average or Excellent.</b>						
01-02 Actual Results	02-03 Actual Results	03-04 Actual Results	04-05 Actual Results	05-06 Adopted	05-06 Projected Results	06-07 Target
n/a	81% of 776 clients	82% of 623 clients	94.43% of 956 clients	90% of 650 clients	90% of 720 clients	90% of 720 clients
<b>What:</b> The Department's client satisfaction survey is used to measure program satisfaction within our treatment programs.						
<b>Why:</b> Client satisfaction is a measure of program effectiveness.						
<b>How are we doing?</b> Initial results from the first half of FY 05-06 reveal that 83.5% of clients in adult treatment who completed their treatment program indicated overall satisfaction (Above Average or Excellent rating) with their experience at Drug and Alcohol Services. Since our current measure of satisfaction is less than anticipated, DAS will engage in a review of returned survey instruments, identify key areas of dissatisfaction and address those identified areas, prior to the next quarterly deployment of satisfaction surveys. (Data Source: Client Exit Satisfaction Survey)						
<b>3. Performance Measure: Percentage of Treatment slots filled (Static Capacity: this is the maximum number of treatment slots able to be filled at any given time) for Prop 36, Perinatal, Youth and Family and Adult Services.</b>						
01-02 Actual Results	02-03 Actual Results	03-04 Actual Results	04-05 Actual Results	05-06 Adopted	05-06 Projected Results	06-07 Target
80% of 391 treatment slots	90% of 593 treatment slots	100% of 477 treatment slots	100% of 477 treatment slots	95% of 547 treatment slots	95% of 547 treatment slots	95% of 547 treatment slots

**What:** Filled treatment slots ensure efficient use of treatment resources.

**Why:** Unused treatment resources are inefficient. The ideal standard for filled treatment slots is 90% to 95% of DAS Static Capacity of 547 clients so that clients can access services when they need them.

**How are we doing?** In FY 04-05 all treatment slots were completely filled, and we anticipate that a trend of nearly filled treatment slots will continue through FY 05-06 and into FY 06-07. New revenue sources have increased treatment slots for FY 05-06 with a subsequent increase in static capacity. (Data Source: DATAR quarterly report.)

**4. Performance Measure: Percentage of Treatment staff who meet professional counseling certification standards set by CA State Department of Alcohol and Drug Programs.** (This was a new measure for 05-06)

01-02 Actual Results	02-03 Actual Results	03-04 Actual Results	04-05 Actual Results	05-06 Adopted	05-06 Projected Results	06-07 Target
n/a	n/a	n/a	66% of all Treatment Staff	80% of all Treatment Staff	80% of all Treatment Staff	85% of all Treatment Staff

**What:** Certification is a measure of professional competency.

**Why:** Certification is a statewide effort to ensure quality of treatment services and to protect the health and safety of treatment program recipients.

**How are we doing?** The current statewide minimum certification requirement is that 30% of treatment staff be certified. Currently 66% of Treatment Staff meet professional counseling standards. DAS is engaged in assessment and training of treatment staff to ensure high professional standards of service delivery and to maintain compliance with certification requirements. (Data Source: DAS Human Resources Data).

**Department Prevention Goal:** To prevent alcohol and other drug problems by providing high quality training and education services to assist the community in the development of healthy alternatives to substance abuse.

**Community-wide Result Link:** A Healthy Community.

**5. Performance Measure: Percentage of the County's population reached through a minimum of 12 prevention awareness events.**

01-02 Actual Results	02-03 Actual Results	03-04 Actual Results	04-05 Actual Results	05-06 Adopted	05-06 Projected Results	06-07 Target
10% (23,236 individuals)	10.5% (27,322 individuals)	12% (32,280) Individuals	12.7% (equates to 33,767 individuals)	12% (equates to approx. 31,200 individuals)	12% (equates to approx. 31,200 individuals)	13% (equates to approx. 33,800 individuals)

**What:** Number of Prevention events and the attendance records from those events indicate the accessibility and the assistance provided to the community at large. Events include the "Safe and Sober Summer" campaign, Red Ribbon Week events, Winter Holiday DUI Prevention campaigns and Community Forums on Binge Drinking Prevention.

**Why:** Consistency and continuity of prevention messages over time is a "best practice".

**How are we doing?** During the first half of FY 05-06, 6,435 individuals (*CA Prevention Activities Prevention System Report, 2005*) were recipients of countywide prevention services. Projected over the entire year, this amounts to 9.7% of 260,000 total county residents. (Prevention activities generally involve fewer individuals during summer months. The second half of FY 05-06 will involve greater numbers of people, bringing our penetration rate to 12%) During the past year, youth continued to become increasingly involved in developing and promoting community-based prevention efforts, with an emphasis on youth asset development, community development projects, and a teen voice in policy development. Our community-based prevention activities have increased our collaborative partnerships with county schools, local community youth task forces, citizens groups and electronic and print media. (Data Source: Prevention Activities Data System)

**6. Performance Measure: Percentage of Friday Night Live participants who demonstrate a reduction in risk factors and/or an increase in protective factors resulting in reduced substance abuse.**

01-02 Actual Results	02-03 Actual Results	03-04 Actual Results	04-05 Actual Results	05-06 Adopted	05-06 Projected Results	06-07 Target
80% of 1,719 Participants	80% of 2,902 Participants	90% of 3,500 Participants	91% of 3,300 Participants	95% of 3,500 Participants	95% of 3,500 Participants	96% of 3,500 Participants

**What:** Participants demonstrate (as measured by focus group outcomes and surveys) improvements in school attendance, problem-solving skills, family environment, school grades, community/family bonding, choice of peer group, awareness of drug risks, and reduced or eliminated drug use.

**Why:** Research by Hawkins/Catalano demonstrates that decreases in standardized risk factors or increases in standardized protective factors results in reduced risk of substance abuse. Risk Factors include: being unaware of risks of drug use, exhibiting low levels of parent/youth communication, truant behavior, and choosing of problem peer groups. Protective Factors include: improved school attendance, high levels of developmental assets, good grades, school/community/youth bonding, and disapproval of drug use.

**How are we doing?** Consistently during the first half of FY 05-06, 95% of participants showed improvements in risk behavior based on pre and post student surveys. Thus, grades, reduced truancy, in-class behavior and school/community/youth bonding all improve significantly. Also reported risk behavior associated with alcohol, tobacco or other drugs also decreased.  
(Data Source: Drug and Alcohol Services Surveys)